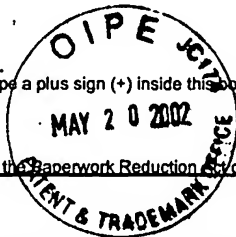


Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/072,355
Filing Date	February 5, 2002
First Named Inventor	Shashidhar Sathyanarayana
Group Art Unit	To be Assigned
Examiner Name	To be Assigned
Attorney Docket Number	268/275

COPY OF PAPERS  
ORIGINALLY FILED

I hereby appoint:

☒ Practitioners at Customer Number

22249



22249

☒ Please direct correspondence to practitioner(s) named below:

Name	Registration Number
David E. Wang	38,358

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☒ Firm or  
Individual Name

Lyon & Lyon LLP

Address Suite 4700

Address 633 West Fifth Street

City Los Angeles State CA ZIP 90071-2066

Country USA

Telephone 949-567-2300 OR 213-489-1600 Fax 949-567-6600 or 213-944-0440

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name SCIMED LIFE SYSTEMS, INC.

Signature By:

Name: Albert K. Fall

Title: Patent Counsel

Date 4-29-02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of one form is submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.